L1000000002794

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700205224577

04/29/11--01002--011 **30.00

TI APR 28 PH 2: 08

D. BRUCE
APR 29 2011
EXAMINER

COVER LETTER

Division of C	Corporations			
SUBJECT:	Karen White	Graphic Design, LL0		
		ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	spondence concerning this matte	r to the following:		
	c/o	o Steven Naclerio, Esq.		
		Name of Person		
Richman Greer, P.A				
Firm/Company				
	201 S.	Biscayne Blvd., Suite 1	000	,
		Address		
		Miami, Florida 33131		APR 2
		City/State and Zip Code		COLUMN CO
	E-mail address: 0	lerio@richmangreer.col to be used for future annual report	notification)	
For further information	n concerning this matter, please	•	,	PH 2: 08 E. FLORIDA
s	teven Naclerio	at (305)	373-4000	•
Nam	e of Person		aytime Telephone Number	
Enclosed is a check for	r the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)		
MAI	ILING ADDRESS:	STREET/CO	URIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Karen White (<u>Graphic Design,</u>	, LLC	
(Name of the Limited Liability C (A Florida Lin	Company as it now appe mited Liability Company	ears on our records.) /)	
The Articles of Organization for this Limited Liability Con Florida document number L10000062794	mpany were filed on	June 11, 2010 and assign	ned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company h	<u>iere</u> :	
Third	d & Ivy, LLC		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Com	npany," the designation "LLC" or the abb	previation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE.	SS	15	
		美 鱼 录 "	5 5
Enter new mailing address, if applicable:		28 SSE	*Christ
(Mailing address MAY BE A POST OFFICE BOX)		्ष क	Π
		54 % C	
B. If amending the registered agent and/or register registered agent and/or the new registered office address		our records, enter the name of t	the new
registered agent and/or the new registered office address	ss nere:		
Name of New Registered Agent:			
New Registered Office Address:			
	E	Enter Florida street address	
	***	, Florida	
	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = N	MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
		Advisor Control of the Control of th	Add			
			Remove			
			Add			
			Add Remove			
			Add Remove			
	***************************************		Add Remove			
			Add Remove			
D. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary,). 			
			N N			
		אַן	2 m			
***************************************		ALTA CONTRACTOR OF THE PROPERTY OF THE PROPERT	. C.) V.			
Dated	April 25-th, 20					
	Signature of a member	r or authorized representative of a member	 			
	Kayen_	White managing member or printed name of signer				
	-78					

Page 2 of 2

Filing Fee: \$25.00